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DECLARATION AND POWER OF ATTORNET

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

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^{**}Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) of the application to which it pertains.

As a below named inventor, I hereby declare that:

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^{*}This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

**Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

1	Typewritten Fi	ıll Name		·	•	
	of Second Join	t Inventor (if any)	Michael	Α	KNEISSL	
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